

PROJECT: ENFORCEMENT NOTICE ACTIONS

LOCATION: VICTORIA GARDENS, VICTORIA ROAD, HUYTON

CLIENT: ELYSIUM HEALTHCARE

OUTLINE BRIEF: RETROSPECTIVE PLANNING ACTIONS FOR AIR CONDITIONING UNITS AND ALTERATIONS TO RESIDENT ACCESSIBLE WINDOWS



DESIGN STATEMENT – BUILDING USE CLARIFICATION

IN LIGHT OF RESENT OBJECTIONS AND NEIGHBOURING RESIDENTS QUESTIONING THE USE OF THE BUILDING, WHILST THIS DOES NOT FORM PART OF THIS SUBMISSION WE HAVE NOTED BELOW THE EXISTING USE OF THE BUILDING AS COMMENTED BY THE APPLICANT.

AGENT COMMENT

IN RESPECT TO THE PROPOSED END USE OF THE BUILDING AND WHETHER IT'S USE AS A REHABILITATION FACILITY FOR THOSE IN NEED OF MENTAL CARE CONSTITUTES A MATERIAL CHANGE OF USE FROM THE LAWFUL USE OF THE BUILDING AS A RESIDENTIAL INSTITUTION UNDER USE CLASS C2 OF THE TOWN AND COUNTRY PLANNING (USE CLASSES) ORDER 1987 (AS AMENDED). IT HAS BEEN QUESTIONED WHETHER THE FACILITY FALLS UNDER A C2A USE WHICH CONSTITUTES A SECURE RESIDENTIAL INSTITUTION (EXAMPLES OF USES WHICH FALL INTO THIS CLASS INCLUDE A PRISON, A SECURE HOSPITAL OR YOUNG OFFENDERS' INSTITUTE).

THE APPLICANT HAS CLARIFIED THAT THE REHABILITATION HOSPITAL WILL NOT BE A SECURE HOSPITAL, RATHER A REHABILITATION FACILITY IN PARTNERSHIP WITH THE NHS TO OFFER AN INPATIENT SERVICE WHICH EFFECTIVELY TACKLES THE CHALLENGES OF MENTAL HEALTH.

THE FACILITY WILL SUPPORT RESIDENTS WHO ARE SUFFERING WITH MENTAL HEALTH ISSUES SUCH AS ANXIETY, DEPRESSION, EMOTIONAL DISTRESS AND PERSONALITY DISORDERS. THIS IS CONSIDERED AN ESSENTIAL INSTRUMENT IN PROMOTING INDEPENDENCE AMONGST RESIDENTS AND THE COMPLETION OF THE PROGRAMME OF REHABILITATION,

LEGAL PRECEDENTS FOR THIS TYPE OF BUILDING HAVE BEEN SET PREVIOUSLY WITH LOCAL PLANNING AUTHORITIES HAVE RECEIVED A LEGAL OPINION WHICH RECOGNISES THAT THIS TYPE OF FACILITY IS FOR REHABILITATION, RATHER THAN A DESIGNATED SECURE UNIT, AND WHILST ACKNOWLEDGING THAT THERE MAY BE A NEED TO SECURE THE PREMISES FOR THE PROTECTION OF THE RESIDENTS THIS DOES NOT TAKE IT OUT OF A C2 USE.

THIS IS SUPPORTED BY ESTABLISHED CASE LAW (EXAMPLES INCLUDE R. (ON THE APPLICATION OF TENDRING DC) V SECRETARY OF STATE FOR COMMUNITIES AND LOCAL GOVERNMENT (QUEEN'S BENCH DIVISION, ADMINISTRATIVE COURT, SULLIVAN J., JULY 31, 2008) (2008) AND HARINGEY (2012)) WHICH SEPARATELY CONCLUDED THAT, IN INSTANCES WHEREBY PSYCHIATRIC REHABILITATION UNITS ARE CONTESTED, SECURITY MEASURES ARE DESIGNED TO PROTECT THE PERSONAL SAFETY AND MENTAL STABILITY OF VULNERABLE RESIDENTS RATHER THAN PREVENTING A DETERMINED ATTEMPT AT ESCAPE, AND ARE NOWHERE NEAR THE LEVELS OF SECURITY THAT WOULD BE FOUND IN A PRISON, DETENTION CENTRE, YOUNG OFFENDERS INSTITUTE ETC. (C2A USES).

THIS UNIT SHOULD NOT BE CONSIDERED A C2A SECURE HOSPITAL AS WHILST LOCKED PROVISIONS ARE PROVIDED THESE SECURITY MEASURES ARE SIMPLY FOR THE PROTECTION OF THE RESIDENT AND NOT TO STOP THEM FROM ABSCONDING. FOR INSTANCE, WHERE A FACILITY IS TO BE DEEMED AS SECURE BY CQC STANDARDS A MINIMUM 3.5M ANTI-CLIMB PERIMETER FENCE WOULD BE REQUIRED TO STOP RESIDENTS FROM LEAVING THE PROPERTY WHEN ACCESSING THE GARDEN.

DESIGN STATEMENT

CLIENT COMMENT

"VICTORIA GARDENS IS A PURPOSE-BUILT UNIT CONTAINING 4 WARDS AND 4 INDEPENDENT LIVING FLATS. ALL PATIENTS HAVE THEIR OWN BEDROOMS WITH EN-SUITE SHOWER FACILITIES WITH ACCESS TO A COMMUNAL BATH.

THE SERVICE CONSISTS OF THREE WARDS FOR SERVICE USERS REQUIRING ASSESSMENT, TREATMENT AND REHABILITATION WITHIN THE CONTEXT OF LOCKED REHABILITATION. THE FOURTH WARD PROVIDES ACUTE INPATIENT CARE FOR MALES REQUIRING ASSESSMENT, STABILISATION AND SUPPORT.

PATIENTS WILL HAVE ACCESS TO INTERNAL COURTYARDS FOR FRESH AIR, THERE ARE MANY ACTIVITY ROOMS FOR OCCUPATIONAL THERAPY WORK AND FOR PATIENTS TO DEVELOP THEIR SKILL IN INDEPENDENCE SUCH AS REHABILITATION KITCHENS, COMPUTER ROOMS ETC,

A FULL MDT WILL BE ON SITE TO PROVIDE THE CORRECT LEVEL OF CARE FOR THE PATIENTS.

IT WILL BE A SERVICE TO HELP PEOPLE RECOVER FROM THE DIFFICULTIES OF LONGER-TERM MENTAL HEALTH PROBLEMS AND SUPPORTING PEOPLE IN TIMES OF CRISIS. IT WILL HELP AND SUPPORT PEOPLE WHO STILL FIND IT DIFFICULT TO COPE WITH EVERYDAY LIFE OR GET ON WITH OTHER PEOPLE. IT WILL AIM TO HELP PATIENTS DEAL WITH PROBLEMS, AND TO LIVE AS INDEPENDENTLY AS POSSIBLE.

THE CLINICAL TEAM ALSO WORK VERY CLOSELY WITH LOCAL SERVICE PROVIDERS, INDIVIDUAL PATIENTS' COMMUNITY NURSES, SOCIAL WORKERS AND OTHER EXTERNAL PROFESSIONALS. WE AIM TO ASSIST PATIENTS IN MAINTAINING AND OR DEVELOPING LINKS WITH FAMILY AND FRIENDS AND TO THE COMMUNITY ENVIRONMENT TO WHICH THEY ARE FAMILIAR.